PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10715513

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			10		00.0.		Γ	RATE	FEE]	RATE	FEE
			 				ŀ			-		
FOR			NUMBER	FILED N	NUMBER EXTRA		-	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			0 minus 20= *		0	0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			(/////////////////////////////////////		6			X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)				(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	L	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
L	FIRST PHESE	ENTATION OF MU	JUTIPLE DEF	'ENDENT CL	AIM			+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
ADDIT. FEE											ADDII. FELT	<u> </u>
AMENDMENT B	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	F R SLY	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	T	X43=		OR	X86=	
4	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT CLAIM			ł					
-					1		L	+145=		OR	+290=	-
				•			A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSL PAID FOR	LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		= :		X\$ 9=		OR	X\$18=	
VME	Independent	*	Minus	***		=	r	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If	f the entry in colur	+145= TOTAL		OR	+290=							
** [** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT. FEE	
		nber Previously Paid					foun	d in the app	ropriate box	in col	umn 1.	